



**Franciscan Home Care and Hospice Care**  
**203-238-1441**

**TESTIMONY**

Delivered by Laura Borrelli, R.N., B.S.N., Hospice Director,  
Franciscan Home Care and Hospice Care  
Before the Public Health Committee

**March 20, 2013**

**Raised Bill No. 6645**

**An Act Concerning Compassionate Aid in Dying for Terminally Ill Patients**

Good day Senator Gerratana, Representative Johnson and members of the Public Health Committee. Thank you for hearing my testimony today. My name is Laura Borrelli and I am the Hospice Director of Franciscan Home Care and Hospice Care out of Meriden. We are a home health agency that serves the health care needs of individuals and their families in 32 towns from West Hartford through New Haven. The hospice program assists those in need of this specialized type of intense caring with an emphasis on pain control and symptom management whether the individual lives in a private home, assisted living facility or a skilled nursing facility.

As an RN with 28 years of experience, predominantly in home health with an area of expertise in hospice I am knowledgeable about End of Life Care. As a concerned daughter and health care representative for elderly parents, my Mom is 86 and my Dad, who has advanced Alzheimer's Disease, will be 89 next month, I know what it means to show compassion for individuals during their final stage of life.

**I am opposed to Raised Bill No. 6645, An Act Concerning Compassionate Aid in Dying for Terminally Ill Patients.**

To manage all symptoms is the ultimate goal of a hospice team through an interdisciplinary approach. There have been times in my experience as a hospice provider that patients or their families have expressed a natural fear of the dying process. With the support of a qualified hospice team, which includes a nurse, social worker, physician, pharmacist, pastoral care worker and volunteers, we are able to alleviate the individuals and families fear and provide care through a naturally dying process. **This is called compassionate care at end of life.**

Pain relief is the foremost objective of hospice care. Updated discussions with the hospice pharmacist and physician allows for effective relief of pain with medication orders. My agency currently uses Hospice Pharmacia, a mail order pharmacy support service that provides emergency medications in the home necessary to attain adequate

symptom management. We have medications available that provide relief of pain and suffering as needed. **This is called compassionate care at end of life.**

We are all physical beings with emotional, spiritual and social needs. Hospice care strives to aid patients and their families in all aspects of their well being. To concentrate on only one area would be to miss the opportunity for fulfilling hopes, dreams and growth in another. In promoting meaning through their activities of daily living, meaning in their life experiences shared, meaning in their evolving feelings and meaning through their naturally dying process the patient and their families are embraced by the full experience of hospice. **This is called compassionate care at end of life.**

Individuals facing their final years, months or days are deserving of dignity through their naturally dying process. Dignity to be cared for in a loving supported manner that values the life they have led. Hospice promotes this level of involvement by focusing on patient centered goals. Allowing the individual and their family to lead the plan of care provides them with the respect and support they have the right to expect. Death with dignity means listening to and caring for patients even when it is difficult, when it may become messy or when there is no one else to do so. **This is compassionate care at end of life.**

Thank you, again for hearing my testimony and if you have further questions, please contact me directly at [lborrelli@franciscanhc.org](mailto:lborrelli@franciscanhc.org) or 203-238-1441.